# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

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23 CV 10095

Write the full name of each plaintiff.

(Include case number if one has been assigned)

-against-

COMPLAINT

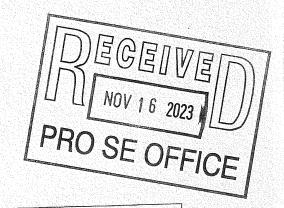
New York City Comptroller,

1 Centre Street,
New York, NY 10007

Do you want a jury trial?

'' Yes X No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.



#### NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

### I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

e a citizen of the same State as any plaintiff.
What is the basis for federal-court jurisdiction in your case?
☑ Federal Question
☐ Diversity of Citizenship
A. If you checked Federal Question
Which of your federal constitutional or federal statutory rights have been violated?  Civil Rights
B. If you checked Diversity of Citizenship
1. Citizenship of the parties
Of what State is each party a citizen?
The plaintiff, is a citizen of the State of
(Plaintiff's name)
마음 사용장 보는 <b>: '''</b> 이 사용하는 것이 되었다. 그 사용 보는 사용 보통 등을 가장 보고 있다. 그는 그리고 있는 것이 되었다. 그는 것이 되었다. 그리고 있다. 그리고 있다. 얼마 지근 물로 있는 '''', ''' 그리고 있는 것이 되었다. 그 그 말이 없는 것이 되었습니다. 그 것이 되었습니다.
(State in which the person resides and intends to remain.)
or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of
물러 보고 있다. 하고 말
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:	
The defendant:	, is a citizen of the State of
(Defendant's name)	
하실어 함께 다른 사람들이 되었다. 그 사는 명이 말을 받았다. 생대는 아이들이 전 사람들이 되었다. 그 사람들이 하고 있다.	요즘 등 등 등 전환하는 등 등을 경험 모든 등로 기계를 받는다. 경험 기계를 보고 있다면 하는 것이 되었다.
or, if not lawfully admitted for permanent subject of the foreign state of	residence in the United States, a citizen or
If the defendant is a corporation:	
The defendant, New York City Comptrolle	f, is incorporated under the laws of
the State of New York	
and has its principal place of business in tl	ne State of New York
or is incorporated under the laws of (foreig	ın state)
and has its principal place of business in	New York City
If more than one defendant is named in the co information for each additional defendant.	,我也没有有一点,我们就是一个人,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的。""我们就是一个人
II. PARTIES	
A. Plaintiff Information	
Provide the following information for each ploages if needed.	aintiff named in the complaint. Attach additional
Claude O	Powell, Jr.
First Name Middle Initial	Last Name
Street Address	
County, City	State Zip Code
Telephone Number	Email Address (if available)

## B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:	New York City Comptr	roller		
	First Name 1 Centre Street	Last Name		
	New York, NY 10007	her identifying information)		
	Current Work Address (or other address where defendant may be served)			
	County, City	State	Zip Code	
Defendant 2:				
	First Name	Last Name		
	Current Job Title (or ot	ther identifying information)		
Current Work Address (or other address where defendant may be se		idant may be served)		
	County, City	State	Zip Code	
Defendant 3:	;;; 당하 화하 하다 하는 사람 ;; 하다 하는 하는 하나 <u>하는 하</u>			
	First Name	Last Name		
Current Job Title (or other identifying information)  Current Work Address (or other address where defendant may be serv		ther identifying information)		
		ndant may be served)		
	County, City	State	Zip Code	

Defendant 4:			
	First Name	Last Name	
	Current Job Title (or	other identifying information)	
	Current Work Addres	ss (or other address where defe	endant may be served)
	County, City	State	Zip Code
III. STATEM Place(s) of occu	ENT OF CLAIM 146 West 12	4th Street #1A, New York, NY	′ 10027
Place(s) of occu			
Date(s) of occu	rrence: July 19, 2021		
FACTS:			
harmed, and wadditional page False Arrest	hat each defendant pe es if needed.	ort your case. Describe what l rsonally did or failed to do tha	t harmed you. Attach
Failure to Ad	<b>#</b>		
Failure to Int	tervene		
	3		
	. <b>)</b>		
	新兴 (1995年) - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		길이를 쓰고 그 사람은 명속 방문했

경기를 보고 있는 그 것도 있는 것도 하고 있다. 그런 이렇게 되는 것은 그런 것은 그런 것은 것이 되는 것은 것이다. 그는 사람들이 되는 것은 것이다. 기가를 하는 것은 것을 하는 것은 것을 하는 것은 것은 것은 것을 하는 것이 없는 것을 하는 것이다.	
[1982] 현실 등 경우 전 경우 등 보고 있다. 1982년 전 경우 등 전 경우 [2012] 현실 등 전 경우 등	
	L. Hiteley at 1919 and 1919. By 1968; 198 <u>9 and 1989 a</u>
하는 것이 많은 것이 되었다. 그리고 있는 것이 되었다. 그리고 있는 것이 되었다. 그런 그리고 있는 것이 되었다. 그런 것이 되었다. 그런 것이 되었다. 	
등 사용하는 것 같다는 것 같다는 그 아이에 가는 것 같아요. 그런 그리고 있는 것 같아 하는 것 같아 보다는 것 같아. 	
injuries:	
If you were injured as a result of these actions, describe your injuries and what treatment, if any, you required and received.	it medical
경로 일달 선택되었어? 그리고 아시아 본 하고 있을 때 내는 사람들은 하고 그리고 하다 같은 아는 다른 함께	
Pain & Suffering	
Pain & Suffering  // Egg/ Eviction  Mental auguish	
//egg/ Eviction  Mental: a yoursh  IV. RELIEF  State briefly what money damages or other relief you want the court to order	
Mental auguish  IV. RELIEF	
//rgg / Eviction  Mental guguish  IV. RELIEF  State briefly what money damages or other relief you want the court to order	
//rgg / Eviction  Mental guguish  IV. RELIEF  State briefly what money damages or other relief you want the court to order	
//rgg / Eviction  Mental guguish  IV. RELIEF  State briefly what money damages or other relief you want the court to order	

#### V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

11/11/23	Clan	de O Parella	
Dated	Plaintiff's	Signature	
Claude	O Powell, J		
First Name 146 West 124th Street Apt.1	Middle Initial Last Name <b>A</b>		
Street Address  New York	NY	10027	
County, City 68 917-856-5826	State otwothez	Zip Code @gmail.com	
Telephone Number	Email Addı	Email Address (if available)	

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☐ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.